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| Under the Paperwork Reduction | Act of 1995, | Application Number | 10/572,609 | mation unless it displays a valid over bottle inclination | | |
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| TRANSMITTAL FORM | | Filing Date | with an effective filing date of September 21, | | | |
| | | First Named Inventor Detlef E | | AASCH et al. CENTRAL FAX C | | |
| (to be used for all correspondence after | r initial filing) | Group Art Unit 3663 | | AUG 2 8 20 | | |
| | | Examiner Name | | Fax: (571) 273-8300 | | |
| Total No. of Pages in this Submission: 9 | | Attorney Docket Number | ZAHFRI P84 | 40US | | |
| `` | | ENCLOSURES (check all t | hat apply) | | | |
| ☐ Fee Transmittal Form | | ☐ Assignment papers (for an Application) | | After Allowance Communication to Group | | |
| ☐ Fee attached - Check ☐ Amendment/Response | Ş | ☐ Drawing(s) | | ☐ Appeal Communication to Board of Appeals and Interferences | | |
| ☐ After Final | on/a) | ☐ Licensing-related Papers ☐ Petition Routing Slip (PT and Accompanying Petit | O/SB/69) | ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | | |
| ☐ Extension of Time Request | ☐ Affidavits/declaration(s) | | ger useful) | ☐ Proprietary Information | | |
| (in Duplicate) | | ☐ To Convert a Provisional | l Petition | ☐ Status Letter | | |
| □ Express Abandonment Request ■ Information Disclosure Stmt [1] □ Certified Copy of Priority Document(s) □ Response to Missing Part/s Incomplete Application | | Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer | | Additional Enclosure(s) (please identify below): | | |
| | | | | Postcard | | |
| | | ☐ Small Entity Statement | | PTO/SB/08a [1] 1 Citation | | |
| | | ☐ Request for Refund | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | |
| REMARKS . | | | ٠ | | | |
| | SIGN | ATURE OF APPLICANT, ATTO | DRNEY, OR AG | SENT | | |
| Firm or Individual Name Mid | hael J. BUJ VIS BUJOLI | OLD P.L.L.C. | Reg. No. 32,018 CUSTOMER NO. 020210 | | | |
| Signature | - Cular 13 ggl | | | | | |
| Date Au | igust 28, | 2007 | | | | |
| | | CERTIFICATE OF TRANS | MISSION | | | |
| I hereby certify that this corre | spondence i | s being facsimile transmitted | to the USPTO o | on <u>August 28, 2007</u> . | | |
| Type or printed name Mich | nael J. BUJC |)LD -//. | | | | |
| Signature | | Nulle V/12 | call | Date: August 28, 2007 (lfb) | | |

In re Application of

08/28/7

PATENT APPLICATION

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DAVIS & BUJOLD, PLLC

AUG 2 8 2007

Detlef BAASCH, Gerhard GUMPOLTSBERGER, Christoph PELCHEN, Barbara SCHMOHL, Ulrich

MAIR and Thomas ROSEMEIER

10/572,609

Serial no. Filed

with an effective filing date of September 21,

2004

DRIVE TRAIN OF AN ALL-WHEEL DRIVE For

VEHICLE COMPRISING CLUTCHES AND METHOD FOR CONTROLLING AND

REGULATING A DRIVE TRAIN

Group Art Unit

Examiner Docket

3663

ZAHFRI P840US

The Commissioner for Patents U.S. Patent & Trademark Office P. O. Box 1450 Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

In connection with this matter, the Applicant hereby attaches United States Patent Office Form PTO/SB/08a and copies of the information listed in the enclosed PTO/SB/08a form, unless otherwise indicated on such Form.

As permitted by 37 CFR 1.98, the Applicant is not supplying a copy of any listed U.S. patent. If the United States Patent and Trademark Office requires a copy of any U.S. patent being disclosed herein, please notify the undersigned of the same.

In the event that there are any fee deficiencies or additional fees are payable, please charge the same or credit any overpayment to our Deposit Account (Account No. 04-0213);

Respectfully submitted,

Michael J. Bujold, Reg. No. 32,018

Customer No. 020216

Davis Bujold & Daniels, P.L.L.C.

112 Pleasant Street

Concord, NH 03301-2931 Telephone 603-226-7490

Facsimile 603-226-7499

E-mail: patent@davisandbujold.com

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| Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | | Complete if Known | | | | | | |
| | | | Applic | Application Number 10/572,60 | | |) | | | |
| | | | Filing | Filing Date | | with an effective filling date of September 21, 2004 | | | | |
| (Use as many sheets as necessary) | | | | First N | lamed Ir | ventor | Detlef BAASCH et al. | | | |
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| Sheet 1 of 1 | | | Attorn | Attorney Docket Number ZAHF | | | RI P840US | | | |
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